PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003

Application or Docket Number

		CLAIMS A	- Column)		(Column 2)			SMALL ENTITY TYPE ZZ		OR SMALL ENTITY		
TOTAL CLAIMS			25				ſ	RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE		OR	BASIC FEE	
TOTAL CHARGEABLE CLAIMS			25 minus 20=		\$			X\$ 9=	45	OR	X\$18=	
INDEPENDENT CLAIMS			5 minus 3 =		2			X42=	84	OR	X84=	
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT					+140=		OR	+280=	
* #	the difference	in column 1 is	less than zero, enter "0" in colun			column 2	ı	TOTAL	504	ÓR	TOTAL	
	С	LAIMS AS A	MENDED - PART II							, 	OTHER THAN	
-	<u> </u>	(Column 1)	3	(Colu		(Column 3)		SMALL	ENTITY	OR.	SMALL	ENTITY
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	-
	Independent	* ENTATION OF M	Minus	***	F CL AHA	=		X42=		OR	X84=	
	FIRST PRESE	IN (ALION OF M	OLTIPLE DEI	-ENDEW	CLANVI			+140=		OR	+280=	7
Э.,							L	TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE	
÷	and the second second				Taran .							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM	OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9≃		OR	X\$18=	
	Independent	*	Minus	***]=		X42=		OR	X84=	
	PIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	CLAIM		!	+140=		0.0	+280=	
							L			OR	7074	
							P	DDIT. FEE		OR	ADDIT. FEE	
	isti — ili ilan m <u>Peristan tarangan</u> —	(Column 1)		(Colu		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* .	Minus	**		=		X\$ 9=		OR	X\$18=	
3	Independent	*	Minus	***		=	lt	X42=		00	X84=	•
	FIRST PRESE	ENTATION OF M	ULTIPLE DE	PENDEN'	T CLAIM		1 			OR	,,,,,,	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+140= TOTAL		OR	+280=	
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR	TOTAL ADDIT. FEE	
		mber Previously Pa					er fou	nd in the app	repriate box	c in co	lumn 1.	